

MONTANA LEGISLATIVE HISTORY

Chapter 636 19 91

Bill H 103 S _____

Original bill & history LC

H. Committee on Human Services

Hearing Date(s) 1-16 ✓ C

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Date Out _____ C

S. Committee on Judiciary

Hearing Date(s) 4-11 Dec

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Did this bill originate in an interim committee? ____ Yes ____ No

Committee _____

Report _____

HOUSE FINAL STATUS

HB 103

	RETURNED TO HOUSE WITH AMENDMENTS		
3/11	2ND READING AMENDMENTS CONCURRED	81	18
3/12	3RD READING AMENDMENTS CONCURRED	91	7
3/16	SIGNED BY SPEAKER		
3/16	SIGNED BY PRESIDENT		
3/18	TRANSMITTED TO GOVERNOR		
3/20	SIGNED BY GOVERNOR		
	CHAPTER NUMBER 101		
		EFFECTIVE DATE: 10/01/91	

HB 102 INTRODUCED BY RUSSELL

ALLOW MANDATORY DUI TREATMENT BY CERTIFIED CHEMICAL
DEPENDENCY COUNSELORS
BY REQUEST OF ADULT AND JUVENILE DETENTION,
JOINT INTERIM SUBCOMMITTEE ON

1/05	INTRODUCED		
1/05	REFERRED TO HUMAN SERVICES & AGING		
1/07	FIRST READING		
1/11	HEARING		
1/17	COMMITTEE REPORT—BILL PASSED AS AMENDED		
1/25	2ND READING PASSED	93	3
1/28	3RD READING PASSED	88	8
	TRANSMITTED TO SENATE		
1/29	FIRST READING		
1/29	REFERRED TO JUDICIARY		
3/06	HEARING		
3/06	COMMITTEE REPORT—BILL CONCURRED		
3/08	2ND READING CONCURRED	49	0
3/09	3RD READING CONCURRED	48	0
	RETURNED TO HOUSE		
3/16	SIGNED BY SPEAKER		
3/16	SIGNED BY PRESIDENT		
3/18	TRANSMITTED TO GOVERNOR		
3/20	SIGNED BY GOVERNOR		
	CHAPTER NUMBER 102		
		EFFECTIVE DATE: 10/01/91	

HB 103 INTRODUCED BY RUSSELL

PROHIBIT PRETRIAL DETENTION OF MENTALLY ILL PERSONS IN JAIL
BY REQUEST OF ADULT AND JUVENILE DETENTION,
JOINT INTERIM SUBCOMMITTEE ON

1/05	INTRODUCED		
1/05	REFERRED TO HUMAN SERVICES & AGING		
1/05	FISCAL NOTE REQUESTED		
1/07	FIRST READING		
1/10	FISCAL NOTE RECEIVED		
1/11	HEARING		
1/12	FISCAL NOTE PRINTED		
1/17	REVISED FISCAL NOTE REQUESTED		
1/17	COMMITTEE REPORT—BILL PASSED AS AMENDED		
1/21	REVISED FISCAL NOTE RECEIVED		
1/22	REVISED FISCAL NOTE PRINTED		
1/25	2ND READING PASSED	75	23
1/25	TAKEN FROM ENGROSSING AND REREFERRED TO APPROPRIATIONS		
3/11	HEARING		
3/23	TABLED IN COMMITTEE		
3/28	TAKEN FROM TABLE IN COMMITTEE AND PLACED ON 2ND READING		
3/28	2ND READING PASSED	56	41
3/28	ON MOTION RULES SUSPENDED TO PLACE ON 3RD READING		
3/28	3RD READING PASSED	56	40

	TRANSMITTED TO SENATE		
3/28	FIRST READING		
3/28	REFERRED TO JUDICIARY		
4/09	HEARING		
4/12	COMMITTEE REPORT—BILL CONCURRED AS AMENDED		
4/13	2ND READING CONCURRED AS AMENDED	48	0
4/15	3RD READING CONCURRED	48	0
	RETURNED TO HOUSE WITH AMENDMENTS		
4/17	2ND READING AMENDMENTS CONCURRED	95	2
4/18	3RD READING AMENDMENTS CONCURRED	92	6
4/20	SIGNED BY SPEAKER		
4/20	SIGNED BY PRESIDENT		
4/20	TRANSMITTED TO GOVERNOR		
4/25	SIGNED BY GOVERNOR		
	CHAPTER NUMBER 636		
	EFFECTIVE DATE: 04/25/91 - SECTION 6, 8		
	EFFECTIVE DATE: 07/01/93 - SECTION 1-5, 7		

HB 104 INTRODUCED BY J. JOHNSON, ET AL.

ALLOW REDUCTION IN THE LENGTH OF A SCHOOL
DAY FOR CERTAIN CIRCUMSTANCES

1/05	INTRODUCED		
1/05	REFERRED TO EDUCATION & CULTURAL RESOURCES		
1/07	FIRST READING		
1/18	HEARING		
1/22	COMMITTEE REPORT—BILL PASSED		
1/23	2ND READING PASSED	81	18
1/25	3RD READING PASSED	79	19
	TRANSMITTED TO SENATE		
1/25	REFERRED TO EDUCATION & CULTURAL RESOURCES		
1/26	FIRST READING		
2/04	HEARING		
2/11	COMMITTEE REPORT-BILL NOT CONCURRED		
2/11	ADVERSE COMMITTEE REPORT ADOPTED	46	2
2/12	MOTION FAILED TO RECONSIDER ADOPTION OF ADVERSE COMMITTEE REPORT	20	26

HB 105 INTRODUCED BY L. NELSON

PROVIDE FOR TRANSFER OF TENURE TEACHER
BETWEEN TEACHING AND ADMINISTRATION

1/05	INTRODUCED		
1/05	REFERRED TO EDUCATION & CULTURAL RESOURCES		
1/07	FIRST READING		
1/18	HEARING		
1/28	COMMITTEE REPORT—BILL PASSED AS AMENDED		
1/30	REREFERRED TO EDUCATION & CULTURAL RESOURCES		
1/31	COMMITTEE REPORT—BILL PASSED AS AMENDED		
2/02	2ND READING PASSED AS AMENDED	82	15
2/05	3RD READING PASSED	87	11
	TRANSMITTED TO SENATE		
2/06	FIRST READING		
2/06	REFERRED TO EDUCATION & CULTURAL RESOURCES		
3/08	HEARING		
3/12	COMMITTEE REPORT—BILL CONCURRED		
3/13	2ND READING CONCURRED	47	2
3/14	3RD READING CONCURRED	43	5
	RETURNED TO HOUSE		
3/22	SIGNED BY SPEAKER		
3/22	SIGNED BY PRESIDENT		
3/23	TRANSMITTED TO GOVERNOR		

HOUSE BILL NO. 103

INTRODUCED BY RUSSELL
BY REQUEST OF THE JOINT INTERIM SUBCOMMITTEE
ON ADULT AND JUVENILE DETENTION

IN THE HOUSE

JANUARY 5, 1991	INTRODUCED AND REFERRED TO COMMITTEE ON HUMAN SERVICES & AGING.
JANUARY 7, 1991	FIRST READING.
JANUARY 17, 1991	COMMITTEE RECOMMEND BILL DO PASS AS AMENDED. REPORT ADOPTED.
JANUARY 18, 1991	PRINTING REPORT.
JANUARY 21, 1991	ON MOTION, PASS CONSIDERATION TO A DAY CERTAIN.
JANUARY 25, 1991	SECOND READING, DO PASS. ON MOTION, REREFERRED TO COMMITTEE ON APPROPRIATIONS.
MARCH 28, 1991	ON MOTION, TAKEN FROM COMMITTEE ON APPROPRIATIONS AND PLACED ON SECOND READING THIS DAY. SECOND READING, DO PASS. ENGROSSING REPORT. ON MOTION, RULES SUSPENDED. BILL PLACED ON THIRD READING THIS DAY. THIRD READING, PASSED. AYES, 56; NOES, 40. TRANSMITTED TO SENATE.

IN THE SENATE

MARCH 28, 1991	INTRODUCED AND REFERRED TO COMMITTEE ON JUDICIARY. FIRST READING.
APRIL 12, 1991	COMMITTEE RECOMMEND BILL BE CONCURRED IN AS AMENDED. REPORT

ADOPTED.

APRIL 13, 1991

SECOND READING, CONCURRED IN AS
AMENDED.

APRIL 15, 1991

THIRD READING, CONCURRED IN.
AYES, 48; NOES, 0.

RETURNED TO HOUSE WITH AMENDMENTS.

IN THE HOUSE

APRIL 17, 1991

RECEIVED FROM SENATE.

SECOND READING, AMENDMENTS
CONCURRED IN.

APRIL 18, 1991

THIRD READING, AMENDMENTS
CONCURRED IN.

SENT TO ENROLLING.

REPORTED CORRECTLY ENROLLED.

1 HOUSE BILL NO. 103

2 INTRODUCED BY RUSSELL

3 BY REQUEST OF THE JOINT INTERIM SUBCOMMITTEE

4 ON ADULT AND JUVENILE DETENTION

5
6 A BILL FOR AN ACT ENTITLED: "AN ACT PROHIBITING THE
7 DETENTION OF MENTALLY ILL PERSONS IN JAIL PENDING A CIVIL
8 COMMITMENT HEARING; REQUIRING SHERIFFS AND JAIL
9 ADMINISTRATORS TO SCREEN AND DIVERT FROM JAIL CERTAIN
10 PERSONS WHO APPEAR TO BE SERIOUSLY MENTALLY ILL; PROVIDING
11 ALTERNATIVES TO THE PLACEMENT OF MENTALLY ILL PERSONS IN
12 JAIL; REQUIRING THE DEPARTMENT OF INSTITUTIONS TO ESTABLISH
13 CRISIS INTERVENTION PROGRAMS; AUTHORIZING TARGETED CASE
14 MANAGEMENT SERVICES FOR THE MENTALLY ILL UNDER THE MEDICAID
15 PROGRAM; AMENDING SECTIONS 53-6-101, 53-21-120, AND
16 53-21-124, MCA; AND PROVIDING A DELAYED EFFECTIVE DATE."

17
18 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

19 Section 1. Section 53-21-120, MCA, is amended to read:

20 "53-21-120. (Temporary) Detention to be in least
21 restrictive environment -- preference for mental health
22 facility -- court relief -- prehearing detention of mentally
23 ill person prohibited. (1) A person detained pursuant to
24 this part ~~shall~~ must be detained in the least restrictive
25 environment required to protect the life and physical safety

1 of the person detained or members of the public; in this
2 respect, prevention of significant injury to property may be
3 considered.

4 (2) Whenever possible, a person detained pursuant to
5 this part ~~shall~~ must be detained in a mental health facility
6 and in the county of residence. If the person detained
7 demands a jury trial and trial cannot be held within 7 days,
8 the individual may be sent to the state hospital until time
9 of trial if arrangements can be made to return him to trial.
10 ~~Such~~ The trial must be held within 30 days. The county of
11 residence shall pay the cost of travel and professional
12 services associated with the trial. ~~No~~ A person may ~~not~~
13 detained in any hospital or other medical facility ~~which~~
14 that is not a mental health facility unless ~~such~~ the
15 hospital or facility has agreed in writing to admit the
16 person.

17 ~~(3) Except-as-provided-in-53-21-1247-a~~ A person may not
18 be detained pursuant to this part in a jail or other
19 correctional facility.

20 (4) A person detained prior to involuntary commitment
21 may apply to the court for immediate relief with respect to
22 the need for detention or the adequacy of the facility being
23 utilized to detain.

24 (5) ~~No--detention~~ Detention may ~~not~~ be ordered under
25 this part for a person concerning whom a petition has been

filed under 53-21-121(1)(b).

(6) No A person may not be involuntarily committed to a mental health facility or detained for evaluation and treatment because he is an epileptic, or is mentally deficient, mentally retarded, senile, or suffering from a mental disorder unless the condition causes him to be seriously mentally ill within the meaning of this part. (Terminates July 1, 1997--sec. 1, Ch. 541, L. 1989.)

53-21-120. (Effective July 1, 1997) Detention to be in least restrictive environment -- preference for mental health facility -- court relief -- prehearing detention of mentally ill person prohibited. (1) A person detained pursuant to this part ~~shall~~ must be detained in the least restrictive environment required to protect the life and physical safety of the person detained or members of the public; in this respect, prevention of significant injury to property may be considered.

(2) Whenever possible, a person detained pursuant to this part ~~shall~~ must be detained in a mental health facility and in the county of residence. If the person detained demands a jury trial and trial cannot be held within 7 days, the individual may be sent to the state hospital until time of trial if arrangements can be made to return him to trial. ~~Such~~ The trial must be held within 30 days. The county of residence shall pay the cost of travel and professional

services associated with the trial. No A person may not be detained in any hospital or other medical facility ~~which~~ that is not a mental health facility unless ~~such~~ the hospital or facility has agreed in writing to admit the person.

(3) ~~Except as provided in 53-21-124, a~~ A person may not be detained pursuant to this part in a jail or other correctional facility.

(4) A person detained prior to involuntary commitment may apply to the court for immediate relief with respect to the need for detention or the adequacy of the facility being utilized to detain."

Section 2. Section 53-21-124, MCA, is amended to read:

"53-21-124. Detention of respondent pending hearing or trial -- jail prohibited. (1) The court may not order detention of a respondent pending the hearing unless requested by the county attorney and upon the existence of probable cause for detention. Counsel ~~shall~~ must be orally notified immediately. Counsel for the respondent may then request a detention hearing, which ~~shall~~ must be held forthwith.

(2) In the event of detention, the respondent ~~shall~~ must be detained in the least restrictive setting necessary to assure his presence and assure his safety and the safety of others as provided in 53-21-120. A respondent ~~may be~~

~~detained in a jail or other correctional facility only if no appropriate mental health facility is immediately available for placement. When the respondent is detained in a jail or other correctional facility, the jail or other facility shall immediately notify the regional central office of the nearest mental health facility, as defined in 53-21-201, that a person detained in the jail or correctional facility is in need of an appropriate placement. Upon notification, the mental health facility shall identify an appropriate placement for the respondent, in accordance with the requirements of 53-21-120. Until a placement is identified, the mental health facility shall report on the status of the placement to the jail or correctional facility within every 12-hour period, including weekends and holidays. When an appropriate placement has been identified, the court must be promptly notified and the respondent must be transferred to that facility as soon as reasonably practical.~~

(3) If the respondent is detained, he ~~shall have~~ has the right to be examined additionally by a professional person of his choice. Unless objection is made by counsel for the respondent, he ~~shall must~~ must continue to be evaluated and treated by the professional person pending the hearing.

(4) A respondent may not be detained in a jail or other correctional facility pending a hearing or trial to determine whether the respondent should be committed to a

mental health facility."

NEW SECTION. Section 3. Diversion of certain mentally

ill persons from jail. (1) The sheriff or administrator of a jail in each county shall require screening of inmates to identify persons accused of minor misdemeanor offenses who appear to be seriously mentally ill, as defined in 53-21-102.

(2) If as a result of screening and observation it is believed that an inmate is seriously mentally ill, the sheriff or administrator of the jail shall:

(a) request services from a crisis intervention program established by the department as provided for in [section 4];

(b) refer the inmate to the nearest community mental health center, as defined in 53-21-212; or

(c) transfer the inmate to a private mental health facility or hospital equipped to provide treatment and care of persons who are seriously mentally ill.

(3) As used in this section, the term "minor misdemeanor offense" includes but is not limited to a nonserious misdemeanor, such as criminal trespass to property, loitering, vagrancy, disorderly conduct, and disturbing the public peace.

NEW SECTION. Section 4. Crisis intervention programs.

(1) The department shall establish crisis intervention

1 programs. The programs must be designed to provide 24-hour
2 emergency admission and care of seriously mentally ill
3 persons in a temporary, safe environment in the community.

4 (2) The department may enter into an interagency
5 agreement with the department of social and rehabilitation
6 services to provide crisis intervention programs as:

7 (a) a rehabilitative service under 53-6-101(3)(j); and

8 (b) a targeted case management service authorized in
9 53-6-101(3)(n).

10 **Section 5.** Section 53-6-101, MCA, is amended to read:

11 "53-6-101. Montana medicaid program -- authorization of
12 services. (1) There is a Montana medicaid program
13 established for the purpose of providing necessary medical
14 services to eligible persons who have need for medical
15 assistance. The Montana medicaid program is a joint
16 federal-state program administered under this chapter and in
17 accordance with Title XIX of the federal Social Security Act
18 (42 U.S.C. 1396, et seq.), as may be amended. The department
19 of social and rehabilitation services shall administer the
20 Montana medicaid program.

21 (2) Medical assistance provided by the Montana medicaid
22 program includes the following services:

23 (a) inpatient hospital services;

24 (b) outpatient hospital services;

25 (c) other laboratory and x-ray services;

1 (d) skilled nursing services in long-term care
2 facilities;

3 (e) physicians' services;

4 (f) nurse specialist services;

5 (g) early and periodic screening, diagnosis, and
6 treatment services for persons under 21 years of age;

7 (h) services provided by physician assistants-certified
8 within the scope of their practice and that are otherwise
9 directly reimbursed as allowed under department rule to an
10 existing provider;

11 (i) health services provided under a physician's orders
12 by a public health department; and

13 (j) hospice care as defined in 42 U.S.C. 1396d(o).

14 (3) Medical assistance provided by the Montana medicaid
15 program may, as provided by department rule, also include
16 the following services:

17 (a) medical care or any other type of remedial care
18 recognized under state law, furnished by licensed
19 practitioners within the scope of their practice as defined
20 by state law;

21 (b) home health care services;

22 (c) private-duty nursing services;

23 (d) dental services;

24 (e) physical therapy services;

25 (f) mental health center services administered and

1 funded under a state mental health program authorized under
2 Title 53, chapter 21, part 2;

3 (g) clinical social worker services;

4 (h) prescribed drugs, dentures, and prosthetic devices;

5 (i) prescribed eyeglasses;

6 (j) other diagnostic, screening, preventive,
7 rehabilitative, chiropractic, and osteopathic services;

8 (k) inpatient psychiatric hospital services for persons
9 under 21 years of age;

10 (l) services of professional counselors licensed under
11 Title 37, chapter 23, if funds are specifically appropriated
12 for the inclusion of these services in the Montana medicaid
13 program;

14 (m) ambulatory prenatal care for pregnant women during
15 a presumptive eligibility period, as provided in 42 U.S.C.
16 1396a(a)(47) and 42 U.S.C. 1396r-1;

17 (n) targeted case management services for the mentally
18 ill, as provided in 42 U.S.C. 1396n(g); and

19 ~~(n)~~(o) any additional medical service or aid allowable
20 under or provided by the federal Social Security Act.

21 (4) The department may implement, as provided for in
22 Title XIX of the federal Social Security Act (42 U.S.C.
23 1396, et seq.), as may be amended, a program under medicaid
24 for payment of medicare premiums, deductibles, and
25 coinsurance for persons not otherwise eligible for medicaid.

1 (5) The department may set rates for medical and other
2 services provided to recipients of medicaid and may enter
3 into contracts for delivery of services to individual
4 recipients or groups of recipients.

5 (6) The services provided under this part may be only
6 those that are medically necessary and that are the most
7 efficient and cost effective.

8 (7) The amount, scope, and duration of services
9 provided under this part must be determined by the
10 department in accordance with Title XIX of the federal
11 Social Security Act (42 U.S.C. 1396, et seq.), as may be
12 amended.

13 (8) Services, procedures, and items of an experimental
14 or cosmetic nature may not be provided.

15 (9) If available funds are not sufficient to provide
16 medical assistance for all eligible persons, the department
17 may set priorities to limit, reduce, or otherwise curtail
18 the amount, scope, or duration of the medical services made
19 available under the Montana medicaid program.

20 (10) Community-based medicaid services, as provided for
21 in part 4 of this chapter, must be provided in accordance
22 with the provisions of this chapter and the rules adopted
23 thereunder. (Subsection (2)(j) terminates June 30,
24 1991--sec. 4, Ch. 633, L. 1989; Subsection (3)(m) terminates
25 June 30, 1991--sec. 15, Ch. 649, L. 1989.)"

1 NEW SECTION. **Section 6.** Codification instruction.

2 [Sections 3 and 4] are intended to be codified as an
3 integral part of Title 53, chapter 21, part 1, and the
4 provisions of Title 53, chapter 21, part 1, apply to
5 [sections 3 and 4].

6 NEW SECTION. **Section 7.** Effective date. [This act] is
7 effective July 1, 1992.

-End-

STATE OF MONTANA - FISCAL NOTE

Form BD-15

In compliance with a written request, there is hereby submitted a Fiscal Note for HB0103, as introduced.

DESCRIPTION OF PROPOSED LEGISLATION: An Act prohibiting the detention of mentally ill persons in jail pending a civil commitment hearing; requiring sheriffs and jail administrators to screen and divert from jail certain persons who appear to be seriously mentally ill; providing alternatives to the placement of mentally ill persons in jail; requiring the department of institutions to establish crisis intervention programs; authorizing targeted case management services for the mentally ill under the medicaid program; amending sections and providing a delayed effective date.

ASSUMPTIONS:

1. This act will be effective July 1, 1992.
Department of Institutions, Crisis Intervention Programs:
2. The Department of Institutions (DOI) would establish crisis intervention programs in eleven counties. These centers would be based upon a pilot project currently underway in Kalispell. DOI cost of one program, based upon the Kalispell model, would be approximately \$241,760 per year. Total cost of eleven equivalent programs would be approximately \$2,659,360.
3. Of the single program cost of \$241,760; \$230,360 would be medicaid eligible expenditures (treatment) and \$11,400 would not be medicaid eligible (room and board costs).
4. 40% of individuals served would be medicaid eligible. FY93 medicaid matching rate is projected to be 28.1% general fund and 71.9% federal revenue.
5. Funding for one program is calculated as follows: General fund \$241,760. Medicaid Federal Reimbursement to the general fund = $\$230,360 \times 40\% \times 71.9\% = \$66,251$. Total General fund impact per program = $\$241,760 - \$66,251 = \$175,509$.
Department of Social And Rehabilitation Services Targeted Case Management for Mentally Ill:
6. Each mentally ill case managed would cost \$120 per month (SRS survey of states with this service). Annual cost of one case = $\$120 \times 12 \text{ months} = \$1,440$ per year.
7. Medicaid eligible population is 59,772 (Federal Fiscal 1990 reports).
8. 11.8% of youth population may have some form of emotional disturbance (Montana Public Health Services State Plan FY90-93 by the Department of Institutions).
9. The percent in assumption 9 above would also apply the general population of medicaid eligible individuals.
10. Annual Case Management Costs would be $59,772 \times 11.8\% \times \$1,440 = \$10,156,458$. Funding for the service would be at the projected federal assistance matching rate for FY93 of 28.1% general fund and 71.9% federal funds.
11. One time cost of computer system changes would be \$60,000 funded 25% general fund and 75% federal funds.
12. The act as introduced would not specifically limit case management services to chronic mental illness.
13. If the act is limited to provision of targeted case management services to only severely emotionally disturbed youth and chronically mentally ill adults, the estimated benefit expenditure would be reduced by approximately \$8.8 million dollars per year.



ROD SUNDSTED, BUDGET DIRECTOR
Office of Budget and Program Planning

1-10-91
DATE



ANGELA RUSSELL, PRIMARY SPONSOR

1-10-91
DATE

Fiscal Note for HB0103, as Introduced

HB 103

FISCAL IMPACT:Expenditures:Department of Institutions:

	FY 92			FY 93		
	Current Law	Proposed Law	Difference	Current Law	Proposed Law	Difference
<u>Expenditures:</u>						
FTE	0	0	0	0	77.00	77.00
Personal Services	0	0	0	0	1,857,680	1,857,680
Operating Costs	0	0	0	0	801,680	801,680
Total	0	0	0	0	2,659,360	(2,659,360)
<u>Funding:</u>						
General Fund	0	0	0	0	2,659,360	2,659,360
Total	0	0	0	0	2,659,360	2,659,360
<u>Revenues:</u>						
General Fund	0	0	0	0	728,761	728,761
Total	0	0	0	0	728,761	728,761

Department of Social and Rehabilitation Services:

	FY 92			FY 93		
	Current Law	Proposed Law	Difference	Current Law	Proposed Law	Difference
<u>Expenditures:</u>						
Operating Costs	0	0	0	0	60,000	60,000
Benefits	0	0	0	0	10,885,219	10,885,219
Total	0	0	0	0	10,945,219	(10,945,219)
<u>Funding:</u>						
General Fund	0	0	0	0	2,868,965	2,868,965
Federal Fund	0	0	0	0	8,076,254	8,076,254
Total	0	0	0	0	10,945,219	10,945,219

HB 103

STATE OF MONTANA - FISCAL NOTE

Form BD-15

In compliance with a written request, there is hereby submitted a Fiscal Note for HB0103, Second Reading.

DESCRIPTION OF PROPOSED LEGISLATION: An act prohibiting the detention of mentally ill persons in jail pending a civil commitment hearing; requiring sheriffs and jail administrators to screen and divert from jail certain persons who appear to be seriously mentally ill; providing alternatives to the placement of mentally ill persons in jail; requiring the Department of Institutions to establish crisis intervention programs; authorizing targeted case management services under the Medicaid Program for adults who are seriously mentally ill; amending sections and providing a delayed effective date.

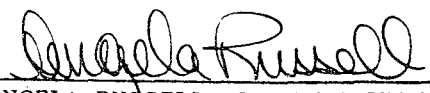
ASSUMPTIONS:

1. This act will be effective July 1, 1992, there is no fiscal impact in FY92.
2. Section 4(1) of the act has been amended to include the language "Subject to Available Appropriations". If no funds are appropriated, the Department of Institutions (DOI) is not required to establish crisis intervention programs.
3. If funds are appropriated by the legislature, the Department of Institutions would contract with private non-profit mental health service providers to establish crisis intervention programs.
4. A Legislative Council survey of jails identified 309 "mentally ill persons held" in jail in 1989; 40% of these individuals would be medicaid eligible.
5. DOI estimates that in order to provide coverage across the state, 8 program locations will be set up. Cost of a current pilot project in Flathead County for crisis intervention is \$241,760. DOI cost of 8 programs is $\$241,760 * 8 = \$1,934,080$ per year.
6. Targeted case management for medicaid eligible clients ($309 * 40\% = 124$) would cost \$120 per month per client based upon an SRS survey of states with the targeted case management option. SRS benefit funds required to pay for the targeted case management service would be $124 \text{ clients} * 12 \text{ months} * \$120 = \$178,506$. At the projected FY93 federal matching rate of 71.90%, federal funds of \$128,385 would be available to pay for the crisis intervention programs provided by DOI.
7. One time cost to add the case management service to the SRS computer system is \$60,000.
8. The agencies are unable to calculate the amount of federal funds which would be available under the rehabilitation services reimbursement without additional definition of the services.

FISCAL IMPACT:

see next page

 1-19-91
ROD SUNDSTED, BUDGET DIRECTOR DATE
Office of Budget and Program Planning

 1/22/91
ANGELA RUSSELL, PRIMARY SPONSOR DATE

Fiscal Note for HB0103, Second Reading

HB 103
SECOND READING

FISCAL IMPACT:

Department of Institutions:

	FY 92			FY 93		
	<u>Current Law</u>	<u>Proposed Law</u>	<u>Difference</u>	<u>Current Law</u>	<u>Proposed Law</u>	<u>Difference</u>
<u>Expenditures:</u>						
Operating Costs	0	0	0	0	1,934,080	1,934,080
Total	0	0	0	0	1,934,080	1,934,080
 <u>Funding:</u>						
General Fund	0	0	0	0	1,805,695	1,805,695
Federal Funds	0	0	0	0	128,385	128,385
Total	0	0	0	0	1,934,080	1,934,080

Department of Social and Rehabilitation Services:

	FY 92			FY 93		
	<u>Current Law</u>	<u>Proposed Law</u>	<u>Difference</u>	<u>Current Law</u>	<u>Proposed Law</u>	<u>Difference</u>
<u>Expenditures:</u>						
FTE						
Operating Cost	0	0	0	0	60,000	60,000
Transfers	0	0	0	0	128,385	128,385
Total	0	0	0	0	188,385	188,385
 <u>Funding:</u>						
General Fund	0	0	0	0	15,000	15,000
Federal Funds	0	0	0	0	173,385	173,385
Total	0	0	0	0	188,385	188,385

HB103
2nd Reading

MINUTES

MONTANA SENATE
52nd LEGISLATURE - REGULAR SESSION

COMMITTEE ON JUDICIARY

Call to Order: By Chairman Dick Pinsoneault, on April 11, 1991, at
11:05 a.m.

ROLL CALL

Members Present:

Dick Pinsoneault, Chairman (D)
Bill Yellowtail, Vice Chairman (D)
Robert Brown (R)
Bruce Crippen (R)
Steve Doherty (D)
Lorents Grosfield (R)
Mike Halligan (D)
John Harp (R)
Joseph Mazurek (D)
David Rye (R)
Paul Svrcek (D)
Thomas Towe (D)

Members Excused: none

Staff Present: Valencia Lane (Legislative Council).

Please Note: These are summary minutes. Testimony and discussion
are paraphrased and condensed.

Announcements/Discussion: none

HEARING ON HOUSE BILL 903

Presentation and Opening Statement by Sponsor:

Representative David Hoffman, District 74, presented the bill
for Representative John Cobb, Sponsor. He said the bill
appropriates funds to the Supreme Court for court automation, and
that the issue, now, is funding. He explained that the bill was
originally to be funded by a one dollar motor vehicle charge, but
this was changed in the House.

Proponents' Testimony:

Jim Oppedahl, Supreme Court Administrator, said the bill
brings the Montana judiciary out of the eighteenth century, and
puts it into the twentieth and twenty-first centuries, via an
appropriation from a special revenue account in the Department of
Social and Rehabilitative Services (SRS).

second, a treatment program. The intent of this legislation (as expressed in the bill summary) prepared by Tom Gomez, was to split the two so that they could be considered separately. That is still the intent. The language on the bottom of page 2 and the top of page 3 requires that the information course must be taken at the place of an approved treatment program, but that language does not require the person to take the approved treatment program. He can take the treatment program any place where there is a certified chemical dependency counselor (CDC), and provided on lines 14 and 15. The intent of the bill is reasonably clear.

REP. CROMLEY asked if there would be additional treatment programs. David Niss stated he did not think so.

Darryl Bruno, Administrator, Chemical Dependency Bureau, stated the intent is to allow CDCs who are not working in approved programs to be able to provide the treatment only. It would allow nonapproved treatment programs; for example, reservation programs provided there is a CDC. It is not the intent of the Department to approve additional programs, certified counselors would provide counseling for repeat offenders. He submitted written information. EXHIBIT 1

David Niss stated the language on page 3, line 14 might be causing confusion; referring to use of the word "program" in the initial position on that line. It is not the intent of this legislation to do anything other than to authorize treatment at a program which uses a CDC. For that purpose, the word "program" on line 13 is superfluous because that is the treatment as opposed to any program that has to do with a CDC. If it would make it clearer, the word "program" could be eliminated.

Motion/Vote: REP. JOHNSON moved to amend HB 102. Motion carried unanimously.

Motion/Vote: REP. STICKNEY MADE A SUBSTITUTE MOTION THAT HB 102 DO PASS AS AMENDED. Motion carried unanimously.

EXECUTIVE ACTION ON HB 103

Motion: REP. STICKNEY MOVED HB 103 DO PASS.

Discussion:

REP. S. RICE provided amendments. EXHIBIT 2

REP. WHALEN stated peace officers are concerned about mentally ill people in rural areas. They don't have any place to put the mentally ill. In the last session it was decided to hold mentally ill people in the least restrictive environment; then contact the closest mental health facility so that person can be transported as soon as there is room.

REP. WHALEN asked REP. S. RICE would this bill work for hospitals if the amendment doesn't pass. REP. S. RICE stated that hospitals need to be able to admit patients based on the ability to treat individual patients appropriately. There may be some cases where a hospital, even though it includes mental health facilities, may not be the right place for that person.

REP. WHALEN asked would there be provisions to accept someone on an emergency basis with the understanding the patient would be moved as quickly as possible to a facility that could more adequately handle that individual. REP. S. RICE stated there is no concern because the amendment addresses the committee's concerns that these people not be placed in jail but somewhere else.

REP. STICKNEY stated that the concern that patients cannot be admitted to a hospital unless there is a written agreement in the bill does not change the intention. REP. S. RICE stated the bill is written so all hospitals and medical facilities have to agree in writing, except for those that are in a mental health facility.

REP. STRIZICH stated there is a specific meaning in "detention". He said it is not the intent of the bill to allow hospitals to detain people. When a person refers to a hospital as a detention facility, it is simply because they can't have a determination screening. The mentally ill do not belong in jail. As soon as possible a screening is held. David Niss stated the detention language is in the section of current law already being amended, authorizing hospitals to detain persons.

REP. J. RICE stated the amendment is not to the bill before the committee. The amendment is to the present law. This is going the opposite direction of the bill that the interim committee brought in.

Motion/Vote: REP. S. RICE moved to amend HB 103. EXHIBIT 2 Motion failed 4-16 with REPS. RUSSELL; WHALEN; BECKER; BOHARSKI; BROWN; DOWELL; GALVIN; HANSEN; KASTEN; LEE; J. RICE; SPRING; SQUIRES; STICKNEY; STRIZICH; and TUNBY voting NO.

Discussion:

REP. BOHARSKI provided amendments to HB 103. EXHIBIT 3

REP. BOHARSKI stated the term "chronically mentally ill" isn't used anymore in the Montana statutes.

REP. WHALEN asked if in the amendments is the term "mentally ill" being struck and replaced with "seriously mentally ill". REP. BOHARSKI stated that "seriously mentally ill" is the term in the statutes and that is the appropriate term to be used. If it remains "mentally ill", then it pertains to all mentally ill people in Montana.

HOUSE HUMAN SERVICES & AGING COMMITTEE

January 16, 1991

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REP. RUSSELL stated the intent of the bill is to honor service to individuals who end up in jail. Presently, with the establishment of crises intervention centers the intent is that those individuals, (some may have private insurance but most do not), and without it they would fit into this category.

REP. BOHARSKI moved to amend to HB 103. EXHIBIT 3. Motion carried unanimously.

Motion: REP. STICKNEY MADE A SUBSTITUTE MOTION THAT HB 103 DO PASS AS AMENDED.

Discussion:

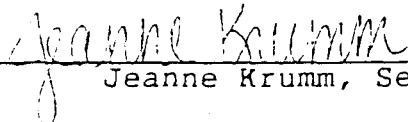
REP. MESSMORE stated the existing law indicated that a person brought to a hospital can be admitted only if the facility has agreed in writing to the person's admission. No one is admitted to a hospital without a physician's order. David Niss stated that not all hospitals have to agree in writing.

REP. KASTEN stated that this bill will put a large strain on finances for the counties because of distances to travel.

Vote: Motion carried 17 to 3 with REPS. KASTEN, MESSMORE, and JOHNSON voting NO.

ADJOURNMENT: 4:00 p.m.


ANGELA RUSSELL, Chair


Jeanne Krumm, Secretary

AR/jck

Recommendation and Vote:

Senator Svrcek made a motion that HB 993 BE CONCURRED IN AS AMENDED. The motion carried unanimously, and Senator Halligan was asked to carry the bill.

EXECUTIVE ACTION ON HOUSE BILL 103Motion:Discussion:Amendments, Discussion, and Votes:

Valencia Lane explained that she revised the amendments requested by Dan Anderson, Department of Institutions, because of technical problems (Exhibit #8). She stated that amendment #3 requires counties to develop county plans, and #4 creates a temporary new section for teams to form county alternatives.

Senator Halligan made a motion to approve the amendments. The motion carried unanimously.

Senator Grosfield stated he had another amendment which was not drafted by Valencia Lane. He said Section 4 addresses crisis intervention subject to available appropriations, and that he wanted to tie that to the same language in the first two sections.

Senator Pinsoneault stated that he has the same concerns.

Senator Halligan made a motion to change the effective date to July 1, 1993, to give DFS time to work on a funding source and crisis intervention. The motion carried unanimously.

Valencia Lane asked to change a corresponding effective date, and Chairman Pinsoneault granted permission.

Recommendation and Vote:

Senator Halligan made a motion that HB 103 BE CONCURRED IN AS AMENDED. The motion carried unanimously.

EXECUTIVE ACTION ON HOUSE BILL 958Motion:

Senator Svrcek made a motion that HB 958 BE TABLED at the request of the sponsor.

Table 1

Local Jails Used for the Detention of the Mentally Ill
and the Number of Mentally Ill Held in Jail in 1989

<u>Name</u>	<u>Routinely handle mentally ill in jail?</u>	<u># Mentally ill persons held</u>
Anaconda-Deer Lodge	Yes	15
Beaverhead	Yes	5
Big Horn	Yes	2
Blaine	No	1
Broadwater	No	3
Cascade	Yes	-NA-
Chouteau	No	10
Daniels	Yes	0
Dawson	Yes	6
Fallon	No	2
Flathead	Yes	48
Gallatin	Yes	19
Glacier	Yes	2
Havre	Yes	0
Hill	Yes	11
Jefferson	Yes	3
Lake	No	4
Lewis & Clark	Yes	104
Lincoln	Yes	22
Mineral	Yes	-NA-
Missoula	No	12
Park	Yes	-NA-
Pondera	No	1
Powder River	Yes	4
Prairie	Yes	0
Ravalli	Yes	6
Richland	No	2
Rosebud-Colstrip	Yes	2
Rosebud-Forsyth	Yes	4
Sanders	No	2
Sheridan	Yes	1
Silver Bow	Yes	15
Stillwater	No	1
Sweetgrass	No	1
Wheatland	Yes	1
Whitefish	No	10

Source: Montana State Legislature, Joint Interim Subcommittee on Adult and Juvenile Detention, Jail Survey, (Helena: MT: Legislative Council, 1990).

HOUSE STANDING COMMITTEE REPORT

January 16, 1991

Page 1 of 1

Mr. Speaker: We, the committee on Human Services and Aging report that House Bill 103 (first reading copy -- white) do pass as amended .

Signed: _____
Angela Russell, Chairman

And, that such amendments read:

1. Title, lines 14 and 15.

Following: "SERVICES" on line 14

Strike: "FOR THE MENTALLY ILL"

Following: "PROGRAM" on line 15

Insert: "FOR ADULTS WHO ARE SERIOUSLY MENTALLY ILL"

2. Page 6, line 25.

Following: "shall"

Insert: ", subject to available appropriations,"

3. Page 7, line 3.

Following: "community"

Insert: "as an alternative to placement in jail"

4. Page 9, line 17 and 18.

Strike: "the" on line 17

Insert: "adults who are seriously"

Following: "1226n(g)" on line 18

Insert: ", but limited to services provided in crisis
intervention programs established under [section 4]"

HOUSE STANDING COMMITTEE REPORT

January 16, 1991

Page 1 of 1

Speaker: We, the committee on Human Services and Aging
that House Bill 102 (first reading copy -- white) do
s amended .

Signed: _____
Angela Russell, Chairman

that such amendments read:

Page 3, line 14.
to: "program"

HOUSE OF REPRESENTATIVES

HUMAN SERVICES AND AGING COMMITTEE

ROLL CALL

DATE 1-16-91

NAME	PRESENT	ABSENT	EXCUSED
REP. ANGELA RUSSELL, CHAIR	✓		
REP. TIM WHALEN, VICE-CHAIR	✓		
REP. ARLENE BECKER	✓		
REP. WILLIAM BOHARSKI	✓		
REP. JAN BROWN	✓		
REP. BRENT CROMLEY	✓		
REP. TIM DOWELL	✓		
REP. PATRICK GALVIN	✓		
REP. STELLA JEAN HANSEN	✓		
REP. ROYAL JOHNSON	✓		
REP. BETTY LOU KASTEN	✓		
REP. THOMAS LEE		✓	
REP. CHARLOTTE MESSMORE	✓		
REP. JIM RICE	✓		
REP. SHEILA RICE	✓		
REP. WILBUR SPRING	✓		
REP. CAROLYN SQUIRES	✓		
REP. JESSICA STICKNEY	✓		
REP. BILL STRIZICH	✓		
REP. ROLPH TUNBY	✓		

Table 3

Local Jails that Rank Detention of the Mentally Ill as One
of the Five Most Serious Problems Affecting the Jail

<u>Name</u>	<u>Ranking</u>
Blaine	4
Chouteau	1
Daniels	2
Fallon	2
Fergus	4
Flathead	2
Gallatin	3
Glacier	1
Granite	2
Havre	4
Jefferson	4
Lewis & Clark	5
Lincoln	3
Park	1
Phillips	5
Pondera	5
Rosebud-Colstrip	4
Rosebud-Forsyth	3
Sheridan	1
Whitefish	4
Yellowstone	5

1 = Most Serious Problem
Affecting the Jail

Source: Montana State Legislature, Joint Interim
Subcommittee on Adult and Juvenile Detention, Jail
Survey (Helena, MT: Legislative Council, 1990).

Ex. 1

1-16-9

HB

Table 2

Local Jails Used for the Detention of Mentally Ill Persons
without Criminal Charge Pending a Civil Commitment Hearing

<u>Name</u>	<u>Mentally ill held pending civil commitment hearing?</u>
Beaverhead	Yes
Big Horn	Yes
Broadwater	Yes
Cascade	Yes
Dawson	Yes
Fergus	Yes
Flathead	Yes
Gallatin	Yes
Glacier	Yes
Hill	Yes
Jefferson	Yes
Lewis & Clark	Yes
Lincoln	Yes
Madison	Yes
Park	Yes
Powder River	Yes
Prairie	Yes
Rosebud-Forsyth	Yes
Sanders	Yes
Silver Bow	Yes

Source: Montana State Legislature, Joint Interim
Subcommittee on Adult and Juvenile Detention,
Jail Survey (Helena, MT: Legislative Council, 1990).

EXHIBIT 2
DATE 1-16-91
HB 103

Amendments to House Bill No. 103
First Reading Copy

Requested by Rep. Sheila Rice
For the Committee on Human Services and Aging

Prepared by David S. Niss
January 16, 1991

1. Title, line 8.

Following: "HEARING;"

Insert: "AUTHORIZING DETENTION IN A MENTAL HEALTH FACILITY ONLY
IF THE FACILITY AGREES IN WRITING;"

2. Page 2, line 14.

Strike: "that is not a mental health facility"

3. Page 4, line 3.

Strike: "that is not a mental health facility"

EXHIBIT 3
DATE 1-16-91
HB 103

Amendments to House Bill No. 103
First Reading Copy

Requested by Representative Bill Boharski
For the House Human Services and Aging Committee

Prepared by Tom Gomez
January 14, 1991

1. Title, lines 14 and 15.
Following: "SERVICES" on line 14
Strike: "FOR THE MENTALLY ILL"
Following: "PROGRAM" on line 15
Insert: "FOR ADULTS WHO ARE SERIOUSLY MENTALLY ILL"
2. Page 6, line 25.
Following: "shall"
Insert: ", subject to available appropriations,"
3. Page 7, line 3.
Following: "community"
Insert: "as an alternative to placement in jail"
4. Page 9, line 17 and 18.
Strike: "the" on line 17
Insert: "adults who are seriously"
Following: "1396n(g)" on line 18
Insert: ", but limited to services provided in crisis
intervention programs established under [section 4]"